



Distance Education Lesson Registration Form

Did you include...?

- Review Payment Form
- Registration Form
- Evaluation Form
- Assignments
- "Tell Us More About You" page

Mail all items to:

Penn State Better Kid Care
Distance Education Program
341 North Science Park Road – Suite 208
State College, PA 16803

For office use only

Transaction # _____

CCO# _____

IMPORTANT — Save a copy of your assignments and forms for your files

| 1: Participant Information | | Indicate where you want your certificate mailed: <input type="checkbox"/> Home <input type="checkbox"/> Business | |
|--|-------|--|--|
| Name (First, Middle, Last) | | | |
| Address | | | |
| City | State | Zip | |
| Phone () | | Fax () | |
| Required for reporting to PA Key: | | | |
| Date of Birth (mm/dd/yyyy) | | E-mail (in order to contact you efficiently) | |

| 2. Place of Employment | | Is this facility a Keystone STARS site? <input type="checkbox"/> Yes <input type="checkbox"/> No | |
|---|-------|--|--|
| Name (leave blank if you do not have a business name) | | | |
| Address | | | |
| City | State | Zip | |
| Phone () | | Fax () | |
| Facility License Number (or, Registration # for home-based providers) | | | |

| 3. Professional Development Information | |
|---|--|
| Title of Distance Education Lesson: How to Turn Good Play into GREAT Play | |
| Are you using this professional development to earn a CDA? <input type="checkbox"/> Yes <input type="checkbox"/> No For more information about CDA visit: www.betterkidcare.psu.edu/page15.html | |
| Are you using this professional development to earn Pennsylvania Act 48 Continuing Professional Education Hours for Certified Educators? <input type="checkbox"/> Yes <input type="checkbox"/> No (if yes, a form will be sent with your certificate) | |
| For more information about earning Continuing Education Units (CEUs) and Act 48 hours visit www.betterkidcare.psu.edu/page06a.html | |



Pennsylvania Keys to Professional Development

Trainee Evaluation Form

Please take a few minutes to answer these questions. What you tell us about the training is important and your personal responses will not be reported. Only a summary of all responses will be given to the trainer.

| | |
|---|---|
| Title of Training: How to Turn Good Play into GREAT Play | Trainer Name: Claudia C. Mincemoyer, Ph.D. |
| Training Site: Penn State Better Kid Care Program | Date of Training: |

1. How clearly were the goals of this training stated?

- Very clearly Somewhat
 A little Not at all

Please write your comments here:

2. Based on the training goals, how much did you learn?

- A lot Some
 A little None

3. The level of this training was...

- Too hard Somewhat hard
 Just right Too easy

4. Why did you select this training? *(Check all that apply)*

- Director recommended Meet STARS requirement
 Training need from PDR Meets 6-hour DPW requirement
 Personal convenience (location, time, etc.)

5. How much will you be able to use what you learned in your child care work?

- A lot Some
 A little Not at all

6. Would you tell others to take this training?

- Yes No Don't Know

7. How would you rate this trainer?

- Excellent Good
 Fair Poor

8. How would you rate this training?

- Excellent Good
 Fair Poor

9. The most important thing(s) that I have learned in this training are:

10. I need training in the following areas: *Check all that apply, for each item checked, please write the specific topics in the space provided and specify the level of training needed:*

| CBK Content Area | Specific Topics | Beginning | Developing | Mastery |
|---|-----------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> Child Growth & Development | _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> The Environment, Curriculum, & Content | _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Families in Society | _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Child Assessment | _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Communication | _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Professionalism & Leadership | _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Healthy, Safety, & Nutrition | _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Program Organization & Administration | _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> Other | _____ | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |